

12-17-01

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Assistant Commissioner for Patents
Box PATENT APPLICATIONS
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the patent application of

Inventor: **Michelle R. Eaves**Title: **Motion Therapy Device**

Enclosed are:

- ☒ 8 sheets of drawings.
☐ An assignment of the invention to
☐ A certified copy of a _____ application.
☒ Declaration For Patent Application (unsigned)

For:	Number Filed	Number Paid For	Number Extra	Rate	Total
Application				\$740.00/\$370.00	\$ 370.00
All Claims	16	20	0	\$18.00 / \$9.00	\$ 0.00
Independent Claims	2	3	0	\$84.00 / \$42.00	\$ 0.00
Assignment Filing Fee				\$40.00	\$.00
Total Filing Fee:					\$370.00

- ☒ A check in the amount of \$370.00 to cover the filing fee is enclosed.
☒ Pursuant to 37 C.F.R. § 1.27, applicant hereby asserts small entity status.
☒ The Commissioner is hereby authorized to charge any deficiency in the payment of the required fee(s) or credit any overpayment to Deposit Account No. 09-0528.

Date:

12/13/01

Respectfully submitted,

John J. Timar

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